

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Florida Freedom PAC

ADDRESS (number and street)

8330 Biscayne Blvd., Ste. 1

☐ Check if different than previously reported. (ACC)

Miami

FL

33138

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00521013

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

11

06

2012

in the State of

FL

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the State of

5. Covering Period

10

01

2012

through

10

17

2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gihan Perera

Signature of Treasurer

Gihan Perera

[Electronically Filed]

Date

12

06

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Florida Freedom PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
10		01		2012

To:

M M	/	D D	/	Y Y Y Y Y Y
10		17		2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2012</td></tr></table>	Y	Y	Y	Y	Y	Y	2012							<table><tr><td colspan="6">0.00</td></tr></table>	0.00					
Y	Y	Y	Y	Y	Y															
2012																				
0.00																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">1023537.38</td></tr></table>	1023537.38																		
1023537.38																				
(c) Total Receipts (from Line 19)	<table><tr><td colspan="6">2188584.61</td></tr></table>	2188584.61						<table><tr><td colspan="6">5897524.71</td></tr></table>	5897524.71											
2188584.61																				
5897524.71																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">3212121.99</td></tr></table>	3212121.99						<table><tr><td colspan="6">5897524.71</td></tr></table>	5897524.71											
3212121.99																				
5897524.71																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">1600557.54</td></tr></table>	1600557.54						<table><tr><td colspan="6">4285960.26</td></tr></table>	4285960.26											
1600557.54																				
4285960.26																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="6">1611564.45</td></tr></table>	1611564.45						<table><tr><td colspan="6">1611564.45</td></tr></table>	1611564.45											
1611564.45																				
1611564.45																				
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">171215.22</td></tr></table>	171215.22																		
171215.22																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Florida Freedom PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
10	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y Y Y
10	/	17	/	2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

4465.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

4465.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2188564.61

5893039.71

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

2188564.61

5897504.71

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

20.00

20.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ▶

2188584.61

5897524.71

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

2188584.61

5897524.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	163219.38	1246025.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	163219.38	1246025.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1423944.56	3018160.40
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	13393.60	21773.91
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1600557.54	4285960.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1600557.54	4285960.26

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2188564.61	5897504.71
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2188564.61	5897504.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	163219.38	1246025.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	20.00	20.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	163199.38	1246005.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 221

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL

Mailing Address 1800 MASSACHUSETTS AVE NW

City State Zip Code
 WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5893039.71

Date of Receipt

10 / **12** / **2012**

Transaction ID : C4513324

Amount of Each Receipt this Period

927267.00

Full Name (Last, First, Middle Initial)

B. SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL

Mailing Address 1800 MASSACHUSETTS AVE NW

City State Zip Code
 WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5893039.71

Date of Receipt

10 / **01** / **2012**

Transaction ID : C4521454

Amount of Each Receipt this Period

1261297.61

* In-Kind: In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

10 / **01** / **2012**

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

2188564.61

TOTAL This Period (last page this line number only)..... ►

2188564.61

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. 1Miami, Inc.

Mailing Address 5725 Corporate Way

City State Zip Code
West Palm Beach FL 33407

Purpose of Disbursement
Reimbursement for Food Purchase

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 03 / 2012

Transaction ID : D341720

Amount of Each Disbursement this Period

4186.00

Full Name (Last, First, Middle Initial)

B. Amrry Gonzalez

Mailing Address 1235 SW 6 Street #1

City State Zip Code
Miami FL 33135

Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 11 / 2012

Transaction ID : D341730

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

C. Atlantic Litho

Mailing Address 1239 N Flagler Dr

City State Zip Code
Fort Lauderdale FL 33304

Purpose of Disbursement
Printing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Transaction ID : D341820

Amount of Each Disbursement this Period

9600.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14586.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. Polnet Communications

Date of Disbursement

Transaction ID : D341830

Amount of Each Disbursement this Period

5020.00

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Petty Cash

Date of Disbursement

Three digital displays showing the date 10/17/2012 in MM/DD/YYYY format. The first display shows '10' with 'M' and 'M' above it. The second display shows '17' with 'D' and 'D' above it. The third display shows '2012' with 'Y', 'Y', 'Y', and 'Y' above it.

Transaction ID : D341630

Amount of Each Disbursement this Period

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Chevron

Date of Disbursement

Three digital displays showing the date 10/01/2012 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '01' with 'D' indicators above it. The third display shows '2012' with 'Y' indicators above it.

Transaction ID : D341640

Amount of Each Disbursement this Period

8400.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

13620.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 221

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Walgreens

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Purpose of Disbursement
Pre-Paid Debit Cards

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2012

Transaction ID : D341650

Amount of Each Disbursement this Period

2024.00

Full Name (Last, First, Middle Initial)

B. Publix

Mailing Address 9050 Biscayne Blvd

City	State	Zip Code
Miami Shores	FL	33138

Purpose of Disbursement
Food and Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2012

Transaction ID : D341660

Amount of Each Disbursement this Period

49.18

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 3636 Executive Center Drive #100

City	State	Zip Code
Austin	TX	78731

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Transaction ID : D341670

Amount of Each Disbursement this Period

11234.89

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13308.07

--

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

Three 10-pin D-sub connectors are shown. The first connector is labeled '10' and has two pins labeled 'M'. The second connector is labeled '03' and has two pins labeled 'D'. The third connector is labeled '2012' and has four pins labeled 'Y'.

Category/
Type

300.00

State: District:

Category/
Type

800.00

State: District:

Category/
Type

Year	Population (millions)
1980	100.00
1985	110.00
1990	120.00
1995	135.00
2000	160.00
2005	170.00
2010	175.00
2015	178.00
2020	180.00

State: District:

1300.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10', the second shows '02', and the third shows '2012'. The displays are arranged horizontally and separated by slashes.

Category/
Type

2242.00

State: District:

Category/
Type

662.00

State: District:

Category/
Type

20.00

State: District:

2924.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Florida Consumer Action Network

Mailing Address 3006 W Kennedy Blvd, Suite B

City
Tampa

State
FL

Zip Code
33609

Purpose of Disbursement
Political Strategy Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 17 / 2012

Transaction ID : D341742

Amount of Each Disbursement this Period

2200.00

Full Name (Last, First, Middle Initial)

B. Decision Point Strategies

Mailing Address 1133 19th St NW
Ste 300

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Direct Mailing Services - No Express Advocacy

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 16 / 2012

Transaction ID : D341822

Amount of Each Disbursement this Period

21115.00

Full Name (Last, First, Middle Initial)

C. Univision Communications Inc

Mailing Address Glenpointe Centre West 500 Frank W
Fl 6

City
Teaneck

State
NJ

Zip Code
07666

Purpose of Disbursement
GOTV Radio Ad Buy - No Express Advocacy

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 12 / 2012

Transaction ID : D341832

Amount of Each Disbursement this Period

10020.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33335.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

The image shows three 10-pin D-sub connectors. The first is labeled 'M10' and has two pins labeled 'M'. The second is labeled 'D02' and has two pins labeled 'D'. The third is labeled 'Y2012' and has four pins labeled 'Y'.

Category/
Type

894.00

State: District:

Category/
Type

State: District:

Category/
Type

200.00

State: District:

1114.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. Walgreens

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Purpose of Disbursement Pre-Paid Debit Cards

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341652

Amount of Each Disbursement this Period

2378.00

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 3101 N. Miami Ave

City	State	Zip Code
Miami	FL	33127

Purpose of Disbursement Telephone Services

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D341662

Amount of Each Disbursement this Period

107.00

Full Name (Last, First, Middle Initial)

C. WYUU

Mailing Address 9721 Executive Center Dr
Ste 200

City	State	Zip Code
Saint Petersburg	FL	33702

Purpose of Disbursement	GOTV Radio Ad Buy - No Express Advocacy
-------------------------	---

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D341833

Amount of Each Disbursement this Period

5020.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7505.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. No Limit Event Rentals

Diagram showing three different connector types: 10-pin, 11-pin, and 2012-pin.

State: District:

B. Zephyrhills

Three digital displays showing the date 10/17/2012 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '17' with 'D' indicators above it. The third display shows '2012' with 'Y' indicators above it.

198.84

State: District:

C. Inside the Box Catering

512.13

State: District:

990.97

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

Three 16-bit registers are shown, each with a 4-bit address above and a 12-bit value below. The first register has address 'M M' and value '10'. The second register has address 'D D' and value '04'. The third register has address 'Y Y Y Y' and value '2012'.

Category/
Type

7020.00

State: District:

Three digital displays showing the date 10/03/2012 in MM/DD/YYYY format. The first display shows '10' for the month, the second shows '03' for the day, and the third shows '2012' for the year. Each display has small indicators above the digits.

Category/
Type

200.00

State: District:

Category/
Type

562.00

State: District:

7782.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

Category/
Type

282.00

State: District:

Category/
Type

300.00

State: District:

Category/
Type

State: District:

782.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

The image shows three different connector types: M10 (a 10-pin D-sub connector), D09 (a 9-pin D-sub connector), and Y2012 (a 20-pin micro-D connector).

Category/
Type

3767.00

State: District:

Category/
Type

134.22

State: District:

Three digital displays showing the date 10/05/2012 in MM/DD/YYYY format. The first display shows '10' for the month, the second shows '05' for the day, and the third shows '2012' for the year. Each display has small 'M', 'D', and 'Y' indicators above the digits.

Category/
Type

1805.42

State: District:

5706.64

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. John Brushwood

Date of Disbursement

Transaction ID : D341737

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. AT&T

Date of Disbursement

Mailing Address 3101 N. Miami Ave

City	State	Zip Code
Miami	FL	33127

Transaction ID : D341817

Purpose of Disbursement	Telephone Services

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Petty Cash

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Transaction ID : D341627

Purpose of Disbursement	
Petty Cash	

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

1897.42

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Petty Cash

Mailing Address

City State Zip Code

Purpose of Disbursement
Petty Cash

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : D341637

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

B. Walgreens

Mailing Address 9020 Biscayne Blvd.

City State Zip Code
Miami FL 33138

Purpose of Disbursement
Pre-Paid Debit Cards

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2012

Transaction ID : D341647

Amount of Each Disbursement this Period

5060.00

Full Name (Last, First, Middle Initial)

C. Amazon

Mailing Address 1516 2nd Ave

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 11 / 2012

Transaction ID : D341667

Amount of Each Disbursement this Period

239.55

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5649.55

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 221

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 3636 Executive Center Drive #100

City Austin State TX Zip Code 78731

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 05 / 2012

Transaction ID : D341678

Amount of Each Disbursement this Period

287.85

Full Name (Last, First, Middle Initial)

B. A Quality Event, Inc.

Mailing Address 1393 NW 74th St

City Miami State FL Zip Code 33147-6429

Purpose of Disbursement
Equipment Rental for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2012

Transaction ID : D341728

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Amrry Gonzalez

Mailing Address 1235 SW 6 Street #1

City Miami State FL Zip Code 33135

Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2012

Transaction ID : D341738

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1387.85

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. Petty Cash

The image shows three different connector types: M10 (a 10-pin D-sub connector), D09 (a 9-pin D-sub connector), and Y2012 (a 20-pin micro-D connector).

City	State	Zip Code
------	-------	----------

Transaction ID : D341628

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

600.00

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B. Petty Cash

Date of Disbursement

Three digital displays showing the date 10/17/2012 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '17' with 'D' indicators above it. The third display shows '2012' with 'Y' indicators above it.

Mailing Address

City	State	Zip Code
------	-------	----------

Transaction ID : D341638

Purpose of Disbursement	Petty Cash

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

300.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

C. Walgreens

Date of Disbursement

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Transaction ID : D341648

Purpose of Disbursement Pre-Paid Debit Cards

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

840.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

1740.00

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 3636 Executive Center Drive #100

City Austin State TX Zip Code 78731

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2012

Transaction ID : D341668

Amount of Each Disbursement this Period

134.22

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 3636 Executive Center Drive #100

City Austin State TX Zip Code 78731

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 05 / 2012

Transaction ID : D341679

Amount of Each Disbursement this Period

11372.42

Full Name (Last, First, Middle Initial)

C. A Quality Event, Inc.

Mailing Address 1393 NW 74th St

City Miami State FL Zip Code 33147-6429

Purpose of Disbursement
Equipment Rental for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2012

Transaction ID : D341719

Amount of Each Disbursement this Period

375.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11881.64

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. Ada Quinones Catering

Three dice are shown side-by-side. The first die shows the number 10, with 'M' on the top face and '10' on the front face. The second die shows the number 11, with 'D' on the top face and '11' on the front face. The third die shows the number 2012, with 'Y' on the top face and '2012' on the front face.

Transaction ID : D341729

Amount of Each Disbursement this Period

score	count
240.00	1

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. One Stop Business Solutions LLC

Date of Disbursement

Transaction ID : D341829

Amount of Each Disbursement this Period

208.65

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Petty Cash

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Transaction ID : D341629

Candidate Name

Amount of Each Disbursement this Period

300.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

748.65

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. Chevron

Mailing Address 700 NW 57th Ave

City	State	Zip Code
Miami	FL	33126-2002

Purpose of Disbursement Pre-Paid Gasoline Cards

Candidate Name _____

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

The image shows three 10-pin D-sub connectors. The first connector is labeled 'M10' and has two pins labeled 'M'. The second connector is labeled 'D01' and has two pins labeled 'D'. The third connector is labeled 'Y2012' and has four pins labeled 'Y'.

Transaction ID : D341639

Amount of Each Disbursement this Period

8400.00

Full Name (Last, First, Middle Initial)

B. Walgreens

Mailing Address 9020 Biscayne Blvd.

City	State	Zip Code
Miami	FL	33138

Purpose of Disbursement
Pre-Paid Debit Cards

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : D341649

Amount of Each Disbursement this Period

426.00

Full Name (Last, First, Middle Initial)

C. Pizza Hut

Mailing Address 8900 Biscayne Blvd

City	State	Zip Code
Miami	FL	33138

Purpose of Disbursement					
Meals					

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement



Transaction ID : D341659

Amount of Each Disbursement this Period

Age Group	Number of People
13-17	165.70
18-24	100.00
25-34	100.00
35-44	100.00
45-54	100.00
55-64	100.00
65-74	100.00
75-84	100.00
85+	100.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8991.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 3636 Executive Center Drive #100

City Austin State TX Zip Code 78731

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 12 2012

Transaction ID : D341669

Amount of Each Disbursement this Period

254.10

Full Name (Last, First, Middle Initial)

B. Elizabeth KennedyMailing Address 230 Phoenetia Avenue
#4

City Miami State FL Zip Code 33134

Purpose of Disbursement
Reimb. - Meals, Lodging

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 03 2012

Transaction ID : D338104

Amount of Each Disbursement this Period

303.52

Full Name (Last, First, Middle Initial)

C. Jeremy Wilson

Mailing Address PO. Box 398372

City Miami Beach State FL Zip Code 33239

Purpose of Disbursement
Reimb. - Event Supplies, Food/Beverage

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 11 2012

Transaction ID : D341732

Amount of Each Disbursement this Period

270.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

827.62

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

A. Jimmy Torres

Mailing Address 3265 NW 87 Ave

City	State	Zip Code
Miami	FL	33172

Purpose of Disbursement	
Reimb. - Meals	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Diagram showing three different connector types: 10-pin, 11-pin, and 2012-pin.

Transaction ID : D341733

Amount of Each Disbursement this Period

15.93

Full Name (Last, First, Middle Initial)

B. Niaya Cason

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement
Reimb. - Meals

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341735

Amount of Each Disbursement this Period

37.00

Full Name (Last, First, Middle Initial)

C. Domino's Pizza

Mailing Address 5045 Soutel Dr

City	State	Zip Code
Jacksonville	FL	32208-1898

Purpose of Disbursement	Meals

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D341936

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	37.00
25-34	25.00
35-44	15.00
45-54	10.00
55-64	5.00
65-74	3.00
75-84	2.00
85+	2.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

52.93

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Florida Freedom PAC

The diagram shows a rectangular frame with 10 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 221

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Angela Given

Mailing Address 1111 E. Atlantic Ave

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Reimb. - Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : D341740

Amount of Each Disbursement this Period

78.08

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 6600 North Military Trail

City Boca Raton State FL Zip Code 33487

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : D341946

Amount of Each Disbursement this Period

20.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Costco Wholesale

Mailing Address 14585 Biscayne Blvd

City North Miami State FL Zip Code 33181

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : D341947

Amount of Each Disbursement this Period

57.76

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.08

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 221

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. Lee MolloyMailing Address 1175 NE Miami Gardens Drive
404 E

City Miami Beach State FL Zip Code 33179

Purpose of Disbursement
Reimb. - Supplies for Video Production

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 17 2012

Transaction ID : D341743

Amount of Each Disbursement this Period

15.60

Full Name (Last, First, Middle Initial)

B. Athena Jones

Mailing Address 600 Yorktown Avenue

City Portsmouth State VA Zip Code 23704

Purpose of Disbursement
Reimb. - Mileage, Office Equipment

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 03 2012

Transaction ID : D341813

Amount of Each Disbursement this Period

240.79

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

256.39

162351.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 221

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Florida Freedom PAC

Full Name (Last, First, Middle Initial)

A. The Pivot Group, Inc.Mailing Address 1720 I Street, NW
Suite 550

City Washington State DC Zip Code 20006

Purpose of Disbursement
Voter Canvass Literature for Non-Federal Candidates

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Transaction ID : D341932

Amount of Each Disbursement this Period

4443.60

Full Name (Last, First, Middle Initial)

B. The Pivot Group, Inc.Mailing Address 1720 I Street, NW
Suite 550

City Washington State DC Zip Code 20006

Purpose of Disbursement
Voter Canvass Literature for Non-Federal Candidates

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2012

Transaction ID : D341834

Amount of Each Disbursement this Period

8950.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13393.60

13393.60

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 39 OF 221

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Florida Freedom PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Florida New Majority

Nature of Debt (Purpose):

Canvass Expenses & Program Costs

Mailing Address 8330 Biscayne Blvd.
Suite 1City State Zip Code
Miami FL 33138

Outstanding Balance Beginning This Period

171215.22

Transaction ID : D338938

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

171215.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

171215.22

2) **TOTALS** This Period (last page this line number only)..... ►

171215.22

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

171215.22

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 40 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Marilyn Carter		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1320 W 11 St		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City Jacksonville	State FL Zip Code 32209	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334705

Full Name (Last, First, Middle Initial) of Payee Devin Coleman		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 736 Odessa Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City Jacksonville	State FL Zip Code 32206	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334708

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">2808.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 41 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Keanna Hall		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 01 / 2012 </div>
Mailing Address 10862 Natalie Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334712

Full Name (Last, First, Middle Initial) of Payee Marta Marcano		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 01 / 2012 </div>
Mailing Address 420 E Galvez Lane Apt 206		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City Ponte Vedra	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 001 </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334713

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2808.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Adil McCoy		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 530 Fallen Timbers		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City State Zip Code Orange Park FL 32073	Transaction ID : D334715	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Orlando Reyes		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 5807 Ricker Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City State Zip Code Jacksonville FL 32244	Transaction ID : D334717	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">2808.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 43 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Velma Rounsville		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 3238 Sedona Trail		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334719

Full Name (Last, First, Middle Initial) of Payee Troy Squire		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1356 W 32 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334722

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2808.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2808.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 44 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ C C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Cameron Starkes		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012
Mailing Address 3919 Robert C Weaver Drive		Amount 1404.00
City Jacksonville	State FL	
Zip Code 32208	Transaction ID : D334725	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Ellis White		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012
Mailing Address 5571 Longspur Ave		Amount 1404.00
City Jacksonville	State FL	
Zip Code 32219	Transaction ID : D334726	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	2808.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 45 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maria Acevedo		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount 702.00	
City Miami	State FL	Zip Code 33135	Transaction ID : D334729
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Acevedo		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount 702.00	
City Miami	State FL	Zip Code 33135	Transaction ID : D334730
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 46 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Lubby Arguello		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1567 SW 4 Street Apt 10		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334734

Full Name (Last, First, Middle Initial) of Payee Lubby Arguello		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1567 SW 4 Street Apt 10		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334735

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Kerline Cambronne		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2861 Somerset Drive #112		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 702.00 </div>
City State Zip Code Fort Lauderdale FL 33311		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334739

Full Name (Last, First, Middle Initial) of Payee Kerline Cambronne		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2861 Somerset Drive #112		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 702.00 </div>
City State Zip Code Fort Lauderdale FL 33311		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 171014.85 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334741

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">1404.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Marie Camy		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive		Amount 702.00	
City North Miami Beach	State FL	Zip Code 33179	Transaction ID : D334743
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Marie Camy		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 2131 NE Miami Gardens Drive		Amount 702.00	
City North Miami Beach	State FL	Zip Code 33179	Transaction ID : D334745
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 49 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 1341 NE 143 Street		Amount 702.00	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		001	State: _____ District: _____
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334746

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 1341 NE 143 Street		Amount 702.00	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		001	State: FL District: 26
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 171014.85		2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334747

(a) SUBTOTAL of Itemized Independent Expenditures.....	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 50 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Rochelle Jackson		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address PO Box 380265		Amount 702.00	
City Miami	State FL	Zip Code 33238	Transaction ID : D334749
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Rochelle Jackson		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address PO Box 380265		Amount 702.00	
City Miami	State FL	Zip Code 33238	Transaction ID : D334751
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 51 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Johann Joseph			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>		
Mailing Address 2131 NE Miami Gardens Drive					
City North Miami Beach	State FL	Zip Code 33179	Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15			Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 2759696.52 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

Transaction ID : D334753

Full Name (Last, First, Middle Initial) of Payee Johann Joseph			Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>		
Mailing Address 2131 NE Miami Gardens Drive					
City North Miami Beach	State FL	Zip Code 33179	Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15			Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 171014.85 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

Transaction ID : D334754

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 52 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Thamara LaCruz		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 21325 NE 8 Place #1K		Amount 702.00	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334757

Full Name (Last, First, Middle Initial) of Payee Thamara LaCruz		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 21325 NE 8 Place #1K		Amount 702.00	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D334758

(a) SUBTOTAL of Itemized Independent Expenditures.....	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 53 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Gennary Merchan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334762

Full Name (Last, First, Middle Initial) of Payee Gennary Merchan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 171014.85 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334763

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 54 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334764

Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334765

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 55 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Rossana Torres		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>
City Miami State FL Zip Code 33172		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334766

Full Name (Last, First, Middle Initial) of Payee Rossana Torres		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>
City Miami State FL Zip Code 33172		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334768

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 56 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Louikens Toussaint		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 429 NW 84 Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334769

Full Name (Last, First, Middle Initial) of Payee Maria Zavala		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 12641 Sw 35 Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334771

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1404.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 57 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maria Zavala		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>		
Mailing Address 12641 Sw 35 Street		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>		
<table style="width:100%;"> <tr> <td style="width:33%;">City Miami</td> <td style="width:33%;">State FL</td> <td style="width:33%;">Zip Code 33175</td> </tr> </table>			City Miami	State FL
City Miami	State FL	Zip Code 33175		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Transaction ID : D334773		
Category/Type 001		Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>26</u> <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA				
Calendar Year-To-Date Per Election for Office Sought 171014.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 				

Full Name (Last, First, Middle Initial) of Payee Pilar Burgos		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>		
Mailing Address 4214 Pershing Pointe Place #3		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>		
<table style="width:100%;"> <tr> <td style="width:33%;">City Orlando</td> <td style="width:33%;">State FL</td> <td style="width:33%;">Zip Code 32822</td> </tr> </table>			City Orlando	State FL
City Orlando	State FL	Zip Code 32822		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Transaction ID : D334774		
Category/Type 001		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA				
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 				

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Linda Echeverria		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 11305 Spining Reel		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334775

Full Name (Last, First, Middle Initial) of Payee Evon Hammond		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 3137 Floral Way East		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Apopka	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334776

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Justin Conner Jones		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 2115 River Tree Circle		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334778

Full Name (Last, First, Middle Initial) of Payee Cartine Obas		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334779

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

Signature

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Date

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 60 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Charles Obas		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 01 / 2012 </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">702.00</div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D334782

Full Name (Last, First, Middle Initial) of Payee Jonathan Obas		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 01 / 2012 </div>
Mailing Address 6372 Raleigh Street Apt 1904		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">702.00</div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D334784

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">1404.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Date

12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Gabriela Ortega		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 3732 Aldergate Pl.		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>
City State Zip Code Casselberry FL 32707	Transaction ID : D334785	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jonathan Ortega		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 3732 Aldergate PL		Amount <div style="border: 1px solid black; padding: 2px;"> 702.00 </div>
City State Zip Code Casselberry FL 32707	Transaction ID : D334786	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Eric Pagan		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 290 Augustine Ct.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Oviedo	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334787

Full Name (Last, First, Middle Initial) of Payee Benjamin Pusey		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334789

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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 Date
M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 63 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Brian Quillen		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 232 Parkwood Drive S		Amount 702.00	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		001	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Diego Renteria		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 430 Green Spring Circle		Amount 702.00	
City Winter Springs	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		001	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 64 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Audeliz Sanchez		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 3104 Orchard Place		Amount 702.00	
City Kissimmee	State FL	Zip Code 34743	Transaction ID : D334795
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Damon Taylor		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 10 Eaton Street		Amount 702.00	
City Eatonville	State FL	Zip Code 32751	Transaction ID : D334796
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1404.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 65 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Antrenic Williams		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 3070 Malcolm Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 702.00 </div>
City State Zip Code Deltona FL 32738	Transaction ID : D334798	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Dionne Allen		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12303 Bohannon Blvd		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 702.00 </div>
City State Zip Code Orlando FL 32824	Transaction ID : D334799	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1404.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 66 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Dionne Allen		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 12303 Bohannon Blvd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 351.00 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Calendar Year-To-Date Per Election for Office Sought 80850.71		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334801

Full Name (Last, First, Middle Initial) of Payee Alexis Cartland		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334802

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1053.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 67 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Alexis Cartland		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>		
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 351.00 </div>		
<table style="width:100%;"> <tr> <td style="width:33%;">City West Palm Beach</td> <td style="width:33%;">State FL</td> <td style="width:33%;">Zip Code 33411</td> </tr> </table>			City West Palm Beach	State FL
City West Palm Beach	State FL	Zip Code 33411		
<table style="width:100%;"> <tr> <td style="width:50%;">Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15</td> <td style="width:50%;">Category/ Type 001</td> </tr> </table>		Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001			
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY				
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y 80850.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

Transaction ID : D334803

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>		
Mailing Address 1834 SE Aneci Street		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 702.00 </div>		
<table style="width:100%;"> <tr> <td style="width:33%;">City Port Saint Lucie</td> <td style="width:33%;">State FL</td> <td style="width:33%;">Zip Code 34983</td> </tr> </table>			City Port Saint Lucie	State FL
City Port Saint Lucie	State FL	Zip Code 34983		
<table style="width:100%;"> <tr> <td style="width:50%;">Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15</td> <td style="width:50%;">Category/ Type 001</td> </tr> </table>		Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type 001			
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA				
Calendar Year-To-Date Per Election for Office Sought Y Y Y Y Y Y 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		

Transaction ID : D334804

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 1053.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012
Mailing Address 1834 SE Aneci Street		Amount 351.00
City Port Saint Lucie	State FL	
Zip Code 34983		Transaction ID : D334805
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		
Category/ Type	001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 80850.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Sarah Halper		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012
Mailing Address 709 S D Street		Amount 702.00
City Lake Worth	State FL	
Zip Code 33460		Transaction ID : D334807
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		
Category/ Type	001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1053.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 69 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Sarah Halper		Date MM / DD / YYYY 10 / 01 / 2012
Mailing Address 709 S D Street		Amount <div style="border: 1px solid black; padding: 2px;">351.00</div>
City Lake Worth	State FL	
Zip Code 33460		Transaction ID : D334809
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">80850.71</div>		

Full Name (Last, First, Middle Initial) of Payee Sandy Hector		Date MM / DD / YYYY 10 / 01 / 2012
Mailing Address 4330 Village Drive #B		Amount <div style="border: 1px solid black; padding: 2px;">702.00</div>
City Delray	State FL	
Zip Code 33445		Transaction ID : D334810
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">2759696.52</div>		

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">1053.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"></div>

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Gihan Perera

[Electronically Filed]

Date

 MM / DD / YYYY
 12 / 06 / 2012

Signature

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date <div> <div>MM / DD / YY</div> <div>10 / 01 / 2012</div> </div>	
Mailing Address 1638 Bresee Road		Amount <div> <div></div> <div>702.00</div> </div>	
City West Palm Beach	State FL	Zip Code 33415	Transaction ID : D334814
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/ Type	001	Office Sought: <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President </div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div>	
Calendar Year-To-Date Per Election for Office Sought	<div> <div></div> <div>2759696.52</div> </div>		Disbursement For: <div> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) </div>

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	1053.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 71 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1638 Bresee Road		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 351.00 </div>
City State Zip Code West Palm Beach FL 33415		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 80850.71 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334815

Full Name (Last, First, Middle Initial) of Payee Louis Porteous		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 702.00 </div>
City State Zip Code Stuart FL 34997		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334819

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 1053.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>

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Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 72 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Louis Porteous		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 351.00 </div>
City State Zip Code Stuart FL 34997	Transaction ID : D334821	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 80850.71 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 2352 Z Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 702.00 </div>
City State Zip Code Riviera Beach FL 33404	Transaction ID : D334823	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y 1053.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> Y Y Y Y Y Y </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 73 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 2352 Z Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 351.00 </div>
City Riviera Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 80850.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334828

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 414 Lincoln Rd.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City Cocoa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334829

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1053.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 74 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 414 Lincoln Rd.		Amount 351.00	
City Cocoa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 80850.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John Tracey		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 2812 Genessee Ave		Amount 702.00	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1053.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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 Date M M / D D / Y Y Y Y Y Y
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 75 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee John Tracey		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 2812 Genessee Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 351.00 </div>
City State Zip Code West Palm Beach FL 33409	Transaction ID : D334833	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 80850.71 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 3414 34th Way		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 702.00 </div>
City State Zip Code West Palm Beach FL 33407	Transaction ID : D334834	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1053.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 76 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 01 / 2012 </div>
Mailing Address 3414 34th Way		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 351.00 </div>
City West Palm Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">80850.71</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334836

Full Name (Last, First, Middle Initial) of Payee Muslim Ali		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 10 / 01 / 2012 </div>
Mailing Address 6513 Yellow Hammer Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D334837

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1755.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 77 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Khaim Jack Cousineau		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City State Zip Code Tampa FL 33612		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334839

Full Name (Last, First, Middle Initial) of Payee Alissah Depiro		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3721 Mission Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City State Zip Code Largo FL 33771		
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334842

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2808.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 78 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Charles Jefferson		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 8515 River Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D334843

Full Name (Last, First, Middle Initial) of Payee Jonathan Juges		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1404.00 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D334845

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2808.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Gihan Perera

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Date

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 79 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Stephen Radcliff		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 6753 Ralston Beach Circle		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334847

Full Name (Last, First, Middle Initial) of Payee Jonathan Romero		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1101 Arboleda Court		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 1404.00 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D334848

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">2808.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 80 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Mable Smith		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 10 / 01 / 2012 </div>
Mailing Address 4203 Arch		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1404.00</div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; text-align: right;">2759696.52</div>		Transaction ID : D334850

Full Name (Last, First, Middle Initial) of Payee Tea Zubic		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M M / D D D / Y Y Y Y Y Y </div> <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 10 / 01 / 2012 </div>
Mailing Address 2704 Brigadoon Drive		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1404.00</div>
City Clearwater	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/1-10/15		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; text-align: right;">2759696.52</div>		Transaction ID : D334853

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2808.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 81 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> 2100.00 </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/1-10/15	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334973

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px;"> 150.00 </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/1-10/15	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 80850.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D334974

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 2250.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 82 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount 300.00	
City Miami	State FL	Zip Code 33138	Transaction ID : D334975
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/1-10/15		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee The Pivot Group, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1720 I Street, NW Suite 550		Amount 596.25	
City Washington	State DC	Zip Code 20006	Transaction ID : D335028
Purpose of Expenditure Voter Canvass Literature		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	896.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee The Pivot Group, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1720 I Street, NW Suite 550		Amount <div style="border: 1px solid black; padding: 2px;"> 1788.75 </div>
City Washington State DC Zip Code 20006	Transaction ID : D335029	
Purpose of Expenditure Voter Canvass Literature	Category/Type 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="border: 1px solid black; padding: 2px;"> 148387.95 </div>
City WASHINGTON State DC Zip Code 20036	Transaction ID : D335030	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 150176.70 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> 0 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 150176.70 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 74193.98 </div>
City WASHINGTON State DC Zip Code 20036	Transaction ID : D335031	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: PATRICK MURPHY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">80850.71</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SERVICE EMPLOYEES INTERNATIONAL UNION PEA-FEDERAL		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 01 / 2012 </div>
Mailing Address 1800 MASSACHUSETTS AVENUE NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1038715.68 </div>
City WASHINGTON State DC Zip Code 20036	Transaction ID : D335032	
Purpose of Expenditure In-Kind: Est. payment for salary and other canvass-related expenses from 10/1-11/6/12	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1112909.66</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1531.20</div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340167

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1531.20</div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340168

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3062.40</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 86 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1030.08 </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340169

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 8330 Biscayne Blvd. Suite 1		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 587.42 </div>
City Miami State FL Zip Code 33138		
Purpose of Expenditure Est. Cost-Food for Canvassers from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3796.82</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340170

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1617.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Hilda Alvarado		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 16325 NW 24 St.		Amount 418.28	
City Hollywood	State FL	Zip Code 33028	Transaction ID : D340171
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hilda Alvarado		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 16325 NW 24 St.		Amount 418.28	
City Hollywood	State FL	Zip Code 33028	Transaction ID : D340172
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Joseph Benia		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 12027 SW 15th St.		Amount 418.28	
City Hollywood	State FL	Zip Code 33025	Transaction ID : D340173
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Joseph Benia		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 12027 SW 15th St.		Amount 418.28	
City Hollywood	State FL	Zip Code 33025	Transaction ID : D340174
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 89 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Lovemore Chiweshe		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 14222 NW 18th Pl.		<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 10 / 16 / 2012 </div>
City Hollywood	State FL	Zip Code 33028
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 001 </div>		Transaction ID : D340175
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Lovemore Chiweshe		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 14222 NW 18th Pl.		<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 10 / 16 / 2012 </div>
City Hollywood	State FL	Zip Code 33028
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 001 </div>		Transaction ID : D340176
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 90 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Marquell Drigo		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 6240 NW 14th Pl.		Amount 418.28
City Fort Lauderdale	State FL	
Zip Code 33313		Transaction ID : D340177
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		

Full Name (Last, First, Middle Initial) of Payee Marquell Drigo		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 6240 NW 14th Pl.		Amount 418.28
City Fort Lauderdale	State FL	
Zip Code 33313		Transaction ID : D340178
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 91 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Nelson Dubreus		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1720 NW 7th Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : D340179	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Nelson Dubreus		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1720 NW 7th Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : D340180	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 92 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Brian Dunlop		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 130 NE 41st St., #8		Amount 418.28	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340181

Full Name (Last, First, Middle Initial) of Payee Brian Dunlop		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 130 NE 41st St., #8		Amount 418.28	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340182

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 93 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Enode Duvercy		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2324 NW 15th St.		Amount 418.28	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340183

Full Name (Last, First, Middle Initial) of Payee Enode Duvercy		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2324 NW 15th St.		Amount 418.28	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340184

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 94 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Patrinda Duvercy		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 906 NW 2nd Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Ft. Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340185

Full Name (Last, First, Middle Initial) of Payee Patrinda Duvercy		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 906 NW 2nd Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Ft. Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340186

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 95 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Marie Fleuridor		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 17335 NW 7 Ave., #109		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340187

Full Name (Last, First, Middle Initial) of Payee Marie Fleuridor		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 17335 NW 7 Ave., #109		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340188

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 96 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Gladys Gomez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 7351 NW 20th Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City State Zip Code Fort Lauderdale FL 33313		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340189

Full Name (Last, First, Middle Initial) of Payee Gladys Gomez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 7351 NW 20th Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City State Zip Code Fort Lauderdale FL 33313		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340190

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 97 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Zanolee Grant		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 151 NW 154th St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340191

Full Name (Last, First, Middle Initial) of Payee Zanolee Grant		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 151 NW 154th St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340192

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 98 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Anton McCormack		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1410 NW 33rd Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340193

Full Name (Last, First, Middle Initial) of Payee Anton McCormack		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1410 NW 33rd Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340194

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 99 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Brayam Morales		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3101 Port Royale Blvd Apt 936		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Brayam Morales		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3101 Port Royale Blvd Apt 936		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 100 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Ryanbo Morales		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 365 NE 191st		Amount 418.28	
City Miami	State FL	Zip Code 33179	Transaction ID : D340198
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ryanbo Morales		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 365 NE 191st		Amount 418.28	
City Miami	State FL	Zip Code 33179	Transaction ID : D340199
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 101 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Joy Myton		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 795 NW 72 Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Pompano Beach	State FL	
Zip Code 33063	Transaction ID : D340200	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 001 </div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Joy Myton		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 795 NW 72 Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Pompano Beach	State FL	
Zip Code 33063	Transaction ID : D340201	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 001 </div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>

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Gihan Perera

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 102 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maria Palomanes		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 227 SE 1st, Apt. A		Amount 418.28	
City Dania	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340202

Full Name (Last, First, Middle Initial) of Payee Maria Palomanes		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 227 SE 1st, Apt. A		Amount 418.28	
City Dania	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340203

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 103 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Virginia Quintanilla		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 415 SE 3rd Ave., Apt. 6		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Hallandale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340204

Full Name (Last, First, Middle Initial) of Payee Virginia Quintanilla		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 415 SE 3rd Ave., Apt. 6		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Hallandale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340205

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 104 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Vinson Renaud		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1107 NW 15th Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340206

Full Name (Last, First, Middle Initial) of Payee Vinson Renaud		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1107 NW 15th Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340207

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 105 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Milagros Rodriguez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2837 NW 184 Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City State Zip Code Hollywood FL 33029	Transaction ID : D340208	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Milagros Rodriguez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2837 NW 184 Terrace		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City State Zip Code Hollywood FL 33029	Transaction ID : D340210	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 Date M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 106 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Sumintra Carlisle		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2850 SW 18 Terr., #17		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">418.28</div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759696.52</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340211

Full Name (Last, First, Middle Initial) of Payee Sumintra Carlisle		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-right: 10px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 2850 SW 18 Terr., #17		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">418.28</div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">294056.50</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340212

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 107 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jimmy Williams		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1420 NW 9th St., Apt. 13		Amount 418.28	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340214

Full Name (Last, First, Middle Initial) of Payee Jimmy Williams		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1420 NW 9th St., Apt. 13		Amount 418.28	
City Fort Lauderdale	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340216

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 108 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee Cornelius Wilson		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 6240 NW 14th Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">418.28</div>	
City Fort Lauderdale	State FL	Zip Code 33313	Transaction ID : D340218
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Cornelius Wilson		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 6240 NW 14th Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">418.28</div>	
City Fort Lauderdale	State FL	Zip Code 33313	Transaction ID : D340219
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 109 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Shonaye Wright		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 5119 NW 16th Pl., Apt 3		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City State Zip Code Fort Lauderdale FL 33313		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340222

Full Name (Last, First, Middle Initial) of Payee Shonaye Wright		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 5119 NW 16th Pl., Apt 3		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City State Zip Code Fort Lauderdale FL 33313		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340223

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 110 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Albertine Bazile		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 749 SW 7 Terrace		Amount 281.39
City Homestead	State FL	
Zip Code 33034		Transaction ID : D340226
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		

Full Name (Last, First, Middle Initial) of Payee Albertine Bazile		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 749 SW 7 Terrace		Amount 281.39
City Homestead	State FL	
Zip Code 33034		Transaction ID : D340227
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 111 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Albertine Bazile		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 749 SW 7 Terrace		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33034	Transaction ID : D340229	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Remy Bornelus		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 13151 SW 265 Terr		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33032	Transaction ID : D340230	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 112 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Remy Bornelus		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 13151 SW 265 Terr		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340231

Full Name (Last, First, Middle Initial) of Payee Remy Bornelus		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 13151 SW 265 Terr		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Calendar Year-To-Date Per Election for Office Sought 171014.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340233

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 113 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Arely Castrejon		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 665 SW 15 St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33034	Transaction ID : D340234	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Arely Castrejon		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 665 SW 15 St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33034	Transaction ID : D340236	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 171014.85 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">562.78</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 114 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Arely Castrejon		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 665 SW 15 St.		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340238
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Aide Cortes		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1481 Kia Dr.		Amount 281.39	
City Homestead	State FL	Zip Code 33033	Transaction ID : D340240
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date M M / D D / Y Y Y Y Y Y
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 115 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Aide Cortes		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>	
Mailing Address 1481 Kia Dr.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : D340241

Full Name (Last, First, Middle Initial) of Payee Aide Cortes		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>	
Mailing Address 1481 Kia Dr.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : D340243

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 116 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jose Diego Cuellar		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 211 SW 6th Ct.		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340244 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought 2759696.52			

Full Name (Last, First, Middle Initial) of Payee Jose Diego Cuellar		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 211 SW 6th Ct.		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340245 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			
Calendar Year-To-Date Per Election for Office Sought 294056.50			

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 117 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jose Diego Cuellar		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 211 SW 6th Ct.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Calendar Year-To-Date Per Election for Office Sought 171014.85 		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340246

Full Name (Last, First, Middle Initial) of Payee Guadalupe Delacruz		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 344 NW 2nd Ave., #3		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340249

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 118 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Guadalupe Delacruz		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 344 NW 2nd Ave., #3		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 001 </div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340250

Full Name (Last, First, Middle Initial) of Payee Guadalupe Delacruz		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 344 NW 2nd Ave., #3		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 001 </div>	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 171014.85 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340251

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 119 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Micheline Dore		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 740 NW 5 St.		Amount 281.39
City Homestead	State FL	
Zip Code 33034		Transaction ID : D340257
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		

Full Name (Last, First, Middle Initial) of Payee Micheline Dore		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 740 NW 5 St.		Amount 281.39
City Homestead	State FL	
Zip Code 33034		Transaction ID : D340259
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 120 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Micheline Dore		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 740 NW 5 St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340261

Full Name (Last, First, Middle Initial) of Payee Joseph Dorsinvil		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 25920 SW 143 Ct, # 313		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340262

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 121 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Joseph Dorsinvil		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 25920 SW 143 Ct, # 313		Amount 281.39	
City Homestead	State FL	Zip Code 33032	Transaction ID : D340264
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Joseph Dorsinvil		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 25920 SW 143 Ct, # 313		Amount 281.39	
City Homestead	State FL	Zip Code 33032	Transaction ID : D340265
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 122 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maira Gaspar		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 328 NW 5th Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340266

Full Name (Last, First, Middle Initial) of Payee Maira Gaspar		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 328 NW 5th Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340267

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 123 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maira Gaspar		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 328 NW 5th Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340268

Full Name (Last, First, Middle Initial) of Payee Maritza Gonzalez		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 12211 SW 264 St.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340270

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 124 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maritza Gonzalez		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 12211 SW 264 St.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340271

Full Name (Last, First, Middle Initial) of Payee Maritza Gonzalez		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 12211 SW 264 St.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33032		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340272

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 125 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Sarai Hernandez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 19541 SW 378th Lane		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340273

Full Name (Last, First, Middle Initial) of Payee Sarai Hernandez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 19541 SW 378th Lane		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340275

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 126 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Sarai Hernandez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 16 / 2012 </div>
Mailing Address 19541 SW 378th Lane		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340277

Full Name (Last, First, Middle Initial) of Payee Adriana Ibanez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 16 / 2012 </div>
Mailing Address 1062 NW 12 St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340279

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">562.78</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 127 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Adriana Ibanez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1062 NW 12 St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294056.50</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340280

Full Name (Last, First, Middle Initial) of Payee Adriana Ibanez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1062 NW 12 St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">171014.85</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340282

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">562.78</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 128 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Elena Loarca		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1010 NE 9th St		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340284

Full Name (Last, First, Middle Initial) of Payee Elena Loarca		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1010 NE 9th St		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340285

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 129 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Elena Loarca		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1010 NE 9th St		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : D340286

Full Name (Last, First, Middle Initial) of Payee Robert Mentor		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 277 NE 9th Ct.		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

Transaction ID : D340290

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Signature

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 130 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Robert Mentor		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 277 NE 9th Ct.		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340292

Full Name (Last, First, Middle Initial) of Payee Robert Mentor		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 277 NE 9th Ct.		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340293

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 131 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jaime Novoa		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1144NE 1 Terr.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030	Transaction ID : D340298	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jaime Novoa		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1144NE 1 Terr.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030	Transaction ID : D340299	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 132 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jaime Novoa		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1144NE 1 Terr.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340300

Full Name (Last, First, Middle Initial) of Payee Felecia O'Neal		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 405 SW 7th Ct		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340301

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 133 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Felecia O'Neal		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 405 SW 7th Ct		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33034	Transaction ID : D340302	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Felecia O'Neal		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 405 SW 7th Ct		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33034	Transaction ID : D340303	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 134 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Leidy Perez		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1201 NW 8 St		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340307

Full Name (Last, First, Middle Initial) of Payee Leidy Perez		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1201 NW 8 St		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D340308

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 135 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Leidy Perez		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1201 NW 8 St		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340310

Full Name (Last, First, Middle Initial) of Payee Domingo Ramirez		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1035 NE 3rd Ave.		Amount 281.39	
City Homestead	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340315

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 136 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Domingo Ramirez		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1035 NE 3rd Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030	Transaction ID : D340316	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Domingo Ramirez		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1035 NE 3rd Ave.		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead State FL Zip Code 33030	Transaction ID : D340318	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 137 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Nicolas Rubio		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 31847 SW 136th Ave.		Amount 281.39	
City Homestead	State FL	Zip Code 33033	Transaction ID : D340320
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nicolas Rubio		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 31847 SW 136th Ave.		Amount 281.39	
City Homestead	State FL	Zip Code 33033	Transaction ID : D340322
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Date

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12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 138 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Nicolas Rubio		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 31847 SW 136th Ave.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead State FL Zip Code 33033		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340323

Full Name (Last, First, Middle Initial) of Payee Judith Famania		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 336 SW 3 St		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 281.39 </div>
City Homestead State FL Zip Code 33034		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340325

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 562.78 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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 Date M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 139 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Judith Famania		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 336 SW 3 St		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340327 Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Judith Famania		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 336 SW 3 St		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340329 Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA			
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 140 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Alex Vanegas		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 450 Davis Parkway		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340331 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought 2759696.52			

Full Name (Last, First, Middle Initial) of Payee Alex Vanegas		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 450 Davis Parkway		Amount 281.39	
City Homestead	State FL	Zip Code 33034	Transaction ID : D340332 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			
Calendar Year-To-Date Per Election for Office Sought 294056.50			

(a) SUBTOTAL of Itemized Independent Expenditures.....	562.78
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 141 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Alex Vanegas		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 450 Davis Parkway		Amount <div style="border: 1px solid black; padding: 2px;"> 281.39 </div>
City Homestead	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: JOE GARCIA		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 171014.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340333

Full Name (Last, First, Middle Initial) of Payee Marilyn Carter		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1320 W 11 St		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340335

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 699.67 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 142 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Marilyn Carter		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1320 W 11 St		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340337

Full Name (Last, First, Middle Initial) of Payee Devin Coleman		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 736 Odessa Street		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340340

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 143 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Devin Coleman		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 736 Odessa Street		Amount 418.28	
City Jacksonville	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340341

Full Name (Last, First, Middle Initial) of Payee Keanna Hall		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 10862 Natalie Dr		Amount 418.28	
City Jacksonville	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	<div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340342

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 144 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ C C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Keanna Hall		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 10862 Natalie Dr		Amount 418.28
City Jacksonville	State FL	
Zip Code 32218	Transaction ID : D340343	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Marta Marcano		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 420 E Galvez Lane Apt 206		Amount 418.28
City Ponte Vedra	State FL	
Zip Code 32081	Transaction ID : D340344	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 145 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Marta Marcano		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 420 E Galvez Lane Apt 206		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code Ponte Vedra FL 32081	Transaction ID : D340345	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Adil McCoy		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 530 Fallen Timbers		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code Orange Park FL 32073	Transaction ID : D340346	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 146 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Adil McCoy		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 530 Fallen Timbers		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Orange Park	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340348

Full Name (Last, First, Middle Initial) of Payee Orlando Reyes		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 5807 Ricker Road		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340349

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 147 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Orlando Reyes		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 5807 Ricker Road		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340350

Full Name (Last, First, Middle Initial) of Payee Velma Rounsville		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3238 Sedona Trail		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340351

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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 12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 148 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Velma Rounsville		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3238 Sedona Trail		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340352

Full Name (Last, First, Middle Initial) of Payee Troy Squire		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1356 W 32 Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Jacksonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340353

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> _____ </div>

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 149 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="float: right; text-align: right;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Troy Squire		Date <div style="border: 1px solid black; padding: 2px; text-align: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">16</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div> </div>		
Mailing Address 1356 W 32 Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">418.28</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Jacksonville</td> <td style="width:33%;">State FL</td> <td style="width:33%;">Zip Code 32209</td> </tr> </table>			City Jacksonville	State FL
City Jacksonville	State FL	Zip Code 32209		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : D340354		
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>		Office Sought: <input type="checkbox"/> House State: <u>FL</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON				
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name (Last, First, Middle Initial) of Payee Cameron Starkes		Date <div style="border: 1px solid black; padding: 2px; text-align: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">M M</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">D D</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y Y Y</div> </div> <div style="text-align: center;"> <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">16</div> / <div style="border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div> </div>		
Mailing Address 3919 Robert C Weaver Drive		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">418.28</div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Jacksonville</td> <td style="width:33%;">State FL</td> <td style="width:33%;">Zip Code 32208</td> </tr> </table>			City Jacksonville	State FL
City Jacksonville	State FL	Zip Code 32208		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : D340355		
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>				
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2759696.52</div>				
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 150 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Cameron Starkes		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3919 Robert C Weaver Drive		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville State FL Zip Code 32208	Transaction ID : D340357	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Ellis White		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 5571 Longspur Ave		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Jacksonville State FL Zip Code 32219	Transaction ID : D340359	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 151 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Ellis White		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 5571 Longspur Ave		Amount 418.28	
City Jacksonville	State FL	Zip Code 32219	Transaction ID : D340360
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Maria Acevedo		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2121 SW 2 Street Apt 7		Amount 418.28	
City Miami	State FL	Zip Code 33135	Transaction ID : D340361
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 152 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Maria Acevedo		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 2121 SW 2 Street Apt 7		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : D340362

Full Name (Last, First, Middle Initial) of Payee Lubby Arguello		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1567 SW 4 Street Apt 10		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : D340364

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 153 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Lubby Arguello		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 1567 SW 4 Street Apt 10		Amount 418.28
City Miami	State FL	
Zip Code 33135		Transaction ID : D340365
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 294056.50		

Full Name (Last, First, Middle Initial) of Payee Marie Camy		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 2131 NE Miami Gardens Drive		Amount 418.28
City North Miami Beach	State FL	
Zip Code 33179		Transaction ID : D340367
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 294056.50		

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 154 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee Marie Camy		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 16 / 2012 </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City North Miami Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340368

Full Name (Last, First, Middle Initial) of Payee Lawrence Cuervo		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 10 / 16 / 2012 </div>
Mailing Address 15705 Miami Lakeway N		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami Lakes	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340369

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

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12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 155 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Lawrence Cuervo		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 15705 Miami Lakeway N		Amount 418.28	
City Miami Lakes	State FL	Zip Code 33014	Transaction ID : D340370
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 1341 NE 143 Street		Amount 418.28	
City Miami	State FL	Zip Code 33161	Transaction ID : D340371
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

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12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 156 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Keren Frederick		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 1341 NE 143 Street		Amount 418.28	
City Miami	State FL	Zip Code 33161	Transaction ID : D340372
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Rochelle Jackson		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address PO Box 380265		Amount 418.28	
City Miami	State FL	Zip Code 33238	Transaction ID : D340373
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 157 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Rochelle Jackson		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address PO Box 380265		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340374

Full Name (Last, First, Middle Initial) of Payee Johann Joseph		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City North Miami Beach	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340375

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 158 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Johann Joseph		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2131 NE Miami Gardens Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 418.28 </div>
City North Miami Beach State FL Zip Code 33179		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340376

Full Name (Last, First, Middle Initial) of Payee Thamara LaCruz		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 21325 NE 8 Place #1K		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 418.28 </div>
City Miami State FL Zip Code 33179		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340377

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 159 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Thamara LaCruz		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 21325 NE 8 Place #1K		Amount 418.28	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340378

Full Name (Last, First, Middle Initial) of Payee Gennary Merchan		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 12990 SW 63 Ter. Apt 606		Amount 418.28	
City Miami	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340379

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 160 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Gennary Merchan		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 12990 SW 63 Ter. Apt 606		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340380

Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340381

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

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 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 161 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Harold Pendas		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1222 NW 58 ST		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340382

Full Name (Last, First, Middle Initial) of Payee Rossana Torres		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340383

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 162 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Rossana Torres		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 8820 Fontainebleau Blvd Apt 206		Amount 418.28
City Miami	State FL	
Zip Code 33172	Transaction ID : D340384	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 294056.50		

Full Name (Last, First, Middle Initial) of Payee Louikens Toussaint		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 429 NW 84 Terrace		Amount 418.28
City Miami	State FL	
Zip Code 33150	Transaction ID : D340385	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)
Calendar Year-To-Date Per Election for Office Sought 2759696.52		

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 163 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Louikens Toussaint		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 429 NW 84 Terrace		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340386

Full Name (Last, First, Middle Initial) of Payee Maria Zavala		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12641 Sw 35 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340387

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 164 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Maria Zavala		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 12641 Sw 35 Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Miami	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340388

Full Name (Last, First, Middle Initial) of Payee Larniece Alexander-Weisz		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 5436 Eugeneia Court		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340389

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 578.75 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 165 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Larniece Alexander-Weisz		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 16 / 2012</div> </div>
Mailing Address 5436 Eugeneia Court		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">160.47</div>
City State Zip Code Orlando FL 32811		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340390

Full Name (Last, First, Middle Initial) of Payee Larniece Alexander-Weisz		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 16 / 2012</div> </div>
Mailing Address 5436 Eugeneia Court		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">160.47</div>
City State Zip Code Orlando FL 32811		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3796.82</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340391

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">320.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 166 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Dionne Allen		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 12303 Bohannon Blvd		Amount 160.47
City Orlando	State FL	
Zip Code 32824		Transaction ID : D340392
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		

Full Name (Last, First, Middle Initial) of Payee Dionne Allen		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 12303 Bohannon Blvd		Amount 160.47
City Orlando	State FL	
Zip Code 32824		Transaction ID : D340393
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Category/Type 001		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 167 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Dionne Allen		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 12303 Bohannon Blvd		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5 5 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340394

Full Name (Last, First, Middle Initial) of Payee Pilar Burgos		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 4214 Pershing Pointe Place #3		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5 5 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340395

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 168 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Pilar Burgos		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 4214 Pershing Pointe Place #3		Amount 160.47	
City Orlando	State FL	Zip Code 32822	Transaction ID : D340396 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Pilar Burgos		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 4214 Pershing Pointe Place #3		Amount 160.47	
City Orlando	State FL	Zip Code 32822	Transaction ID : D340397 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS			
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 169 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Linda Echeverria		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 11305 Spining Reel		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340399

Full Name (Last, First, Middle Initial) of Payee Linda Echeverria		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 11305 Spining Reel		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340400

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 170 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Linda Echeverria		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 11305 Spining Reel		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought 5 5 3796.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340401

Full Name (Last, First, Middle Initial) of Payee Emanuel Glenn		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 6723 Stardust Lane		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought 5 5 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340402

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 171 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Emanuel Glenn		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6723 Stardust Lane		Amount 160.47	
City Orlando	State FL	Zip Code 32818	Transaction ID : D340403 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 294056.50			

Full Name (Last, First, Middle Initial) of Payee Emanuel Glenn		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6723 Stardust Lane		Amount 160.47	
City Orlando	State FL	Zip Code 32818	Transaction ID : D340404 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 3796.82			

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 172 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Evon Hammond		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3137 Floral Way East		Amount 160.47	
City Apopka	State FL	Zip Code 32703	Transaction ID : D340405
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Evon Hammond		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3137 Floral Way East		Amount 160.47	
City Apopka	State FL	Zip Code 32703	Transaction ID : D340406
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 173 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Evon Hammond		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3137 Floral Way East		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Apopka	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3796.82</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340407

Full Name (Last, First, Middle Initial) of Payee Justin Conner Jones		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2115 River Tree Circle		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340412

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">320.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 174 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Justin Conner Jones		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2115 River Tree Circle		Amount 160.47	
City Orlando	State FL	Zip Code 32839	Transaction ID : D340414
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Justin Conner Jones		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2115 River Tree Circle		Amount 160.47	
City Orlando	State FL	Zip Code 32839	Transaction ID : D340415
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Gihan Perera

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Signature

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 175 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ C C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Cartine Obas		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount 160.47
City Orlando	State FL	
Zip Code 32835		Transaction ID : D340416
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Cartine Obas		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount 160.47
City Orlando	State FL	
Zip Code 32835		Transaction ID : D340417
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 176 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Cartine Obas		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 3796.82 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340418

Full Name (Last, First, Middle Initial) of Payee Charles Obas		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340419

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 320.94 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 177 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Charles Obas		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>		
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>		
<table style="width: 100%;"> <tr> <td style="width: 33%;">City Orlando</td> <td style="width: 33%;">State FL</td> <td style="width: 33%;">Zip Code 32835</td> </tr> </table>			City Orlando	State FL
City Orlando	State FL	Zip Code 32835		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : D340420		
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Office Sought: <input type="checkbox"/> House State: <u>FL</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON				
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294056.50</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name (Last, First, Middle Initial) of Payee Charles Obas		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>		
Mailing Address 2544 Robert Trent Jones Drive Unit		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>		
<table style="width: 100%;"> <tr> <td style="width: 33%;">City Orlando</td> <td style="width: 33%;">State FL</td> <td style="width: 33%;">Zip Code 32835</td> </tr> </table>			City Orlando	State FL
City Orlando	State FL	Zip Code 32835		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Transaction ID : D340421		
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>				
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>10</u> <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3796.82</div>				
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">320.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 178 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee David O'Conner		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 526 S Hampton Ave		Amount 160.47	
City Orlando	State FL	Zip Code 32803	Transaction ID : D340423
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee David O'Conner		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 526 S Hampton Ave		Amount 160.47	
City Orlando	State FL	Zip Code 32803	Transaction ID : D340424
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 179 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee David O'Conner		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 526 S Hampton Ave		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340425

Full Name (Last, First, Middle Initial) of Payee Gabriela Ortega		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3732 Aldergate Pl.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Casselberry	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340428

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 180 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Gabriela Ortega		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3732 Aldergate Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City Casselberry	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340431

Full Name (Last, First, Middle Initial) of Payee Gabriela Ortega		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3732 Aldergate Pl.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City Casselberry	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 3796.82 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340432

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 181 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Jonathan Ortega		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3732 Aldergate PL		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City State Zip Code Casselberry FL 32707	Transaction ID : D340434	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jonathan Ortega		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3732 Aldergate PL		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 160.47 </div>
City State Zip Code Casselberry FL 32707	Transaction ID : D340437	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">320.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 182 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jonathan Ortega		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3732 Aldergate PL		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City State Zip Code Casselberry FL 32707	Transaction ID : D340438	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3796.82 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Eric Pagan		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 290 Augustine Ct.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City State Zip Code Oviedo FL 32765	Transaction ID : D340441	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 320.94 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 183 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Eric Pagan		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 290 Augustine Ct.		Amount 160.47	
City Oviedo	State FL	Zip Code 32765	Transaction ID : D340442
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Eric Pagan		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 290 Augustine Ct.		Amount 160.47	
City Oviedo	State FL	Zip Code 32765	Transaction ID : D340443
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 184 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Benjamin Pusey		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340444

Full Name (Last, First, Middle Initial) of Payee Benjamin Pusey		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50 		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340445

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 185 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Benjamin Pusey		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 4150 Eastgate Ave #7108		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5 5 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340446

Full Name (Last, First, Middle Initial) of Payee Diego Renteria		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 430 Green Spring Circle		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Winter Springs	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5 5 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340447

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 186 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Diego Renteria		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 430 Green Spring Circle		Amount 160.47	
City Winter Springs	State FL	Zip Code 32708	Transaction ID : D340448
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Diego Renteria		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 430 Green Spring Circle		Amount 160.47	
City Winter Springs	State FL	Zip Code 32708	Transaction ID : D340449
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

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12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 187 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ C C00521013
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Audeliz Sanchez		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 3104 Orchard Place		Amount 160.47
City Kissimmee	State FL	
Zip Code 34743		Transaction ID : D340450
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Audeliz Sanchez		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address 3104 Orchard Place		Amount 160.47
City Kissimmee	State FL	
Zip Code 34743		Transaction ID : D340451
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

Signature

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Date

M M / D D / Y Y Y Y Y Y
12 / 06 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 188 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Audeliz Sanchez		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3104 Orchard Place		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Kissimmee	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3796.82</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340452

Full Name (Last, First, Middle Initial) of Payee Damon Taylor		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 10 Eaton Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 160.47 </div>
City Eatonville	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340453

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">320.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 189 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Damon Taylor		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 10 Eaton Street		Amount 160.47	
City Eatonville	State FL	Zip Code 32751	Transaction ID : D340454
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Damon Taylor		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 10 Eaton Street		Amount 160.47	
City Eatonville	State FL	Zip Code 32751	Transaction ID : D340455
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 190 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Antrenic Williams		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3070 Malcolm Drive		Amount 160.47	
City Deltona	State FL	Zip Code 32738	Transaction ID : D340456
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Antrenic Williams		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3070 Malcolm Drive		Amount 160.47	
City Deltona	State FL	Zip Code 32738	Transaction ID : D340457
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 191 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Antrenic Williams		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3070 Malcolm Drive		Amount 160.47	
City Deltona	State FL	Zip Code 32738	Transaction ID : D340458
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Sterling Williams		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3115 Houndsworth Court		Amount 160.47	
City Orlando	State FL	Zip Code 32837	Transaction ID : D340459
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

MM / DD / YYYY
12 / 06 / 2012

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 192 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Sterling Williams		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3115 Houndsworth Court		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340460

Full Name (Last, First, Middle Initial) of Payee Sterling Williams		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3115 Houndsworth Court		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10
Calendar Year-To-Date Per Election for Office Sought 3796.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340461

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 320.94 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 193 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maxxwell Wright		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2424 Barkwater Drive		Amount 160.47	
City Orlando	State FL	Zip Code 32839	Transaction ID : D340462 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought 2759696.52			

Full Name (Last, First, Middle Initial) of Payee Maxxwell Wright		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2424 Barkwater Drive		Amount 160.47	
City Orlando	State FL	Zip Code 32839	Transaction ID : D340463 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON			
Calendar Year-To-Date Per Election for Office Sought 294056.50			

(a) SUBTOTAL of Itemized Independent Expenditures.....	320.94
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 194 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Maxxwell Wright		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2424 Barkwater Drive		Amount <div style="border: 1px solid black; padding: 2px;"> 160.47 </div>
City Orlando	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: VALDEZ VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5 5 3796.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340464

Full Name (Last, First, Middle Initial) of Payee Kerline Cambronne		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2861 Somerset Drive #112		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City Fort Lauderdale	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5 5 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : D340465

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 477.35 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> 477.35 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 195 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Kerline Cambronne		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2861 Somerset Drive #112		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 316.88 </div>
City State Zip Code Fort Lauderdale FL 33311	Transaction ID : D340466	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Alexis Cartland		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 316.88 </div>
City State Zip Code West Palm Beach FL 33411	Transaction ID : D340467	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 150px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px;"> 633.76 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; width: 150px;"> 633.76 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 196 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Alexis Cartland		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 6492 Emerald Dunes Drive # 305		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code West Palm Beach FL 33411		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340469

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1834 SE Aneci Street		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code Port Saint Lucie FL 34983		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340471

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 633.76 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 197 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Kathy Dent		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1834 SE Aneci Street		Amount 316.88	
City Port Saint Lucie	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 294056.50			

Transaction ID : D340472

Full Name (Last, First, Middle Initial) of Payee Sarah Halper		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 709 S D Street		Amount 316.88	
City Lake Worth	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2759696.52			

Transaction ID : D340473

(a) SUBTOTAL of Itemized Independent Expenditures.....	633.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 198 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Sarah Halper		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 709 S D Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 316.88 </div>
City Lake Worth	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340474

Full Name (Last, First, Middle Initial) of Payee Sandy Hector		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 4330 Village Drive #B		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 316.88 </div>
City Delray	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340475

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> 633.76 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; width: 100%;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 199 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Sandy Hector		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 4330 Village Drive #B		Amount 316.88	
City Delray	State FL	Zip Code 33445	Transaction ID : D340476
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 1638 Bresee Road		Amount 316.88	
City West Palm Beach	State FL	Zip Code 33415	Transaction ID : D340477
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	633.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 200 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Tony Patterson		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1638 Bresee Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code West Palm Beach FL 33415	Transaction ID : D340478	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Louis Porteous		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code Stuart FL 34997	Transaction ID : D340479	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">633.76</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 201 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Louis Porteous		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 3059 SE Amherst Street		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code Stuart FL 34997	Transaction ID : D340480	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Brian Quillen		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 232 Parkwood Drive S		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code West Palm Beach FL 33411	Transaction ID : D340481	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 633.76 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 202 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Brian Quillen		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 232 Parkwood Drive S		Amount 316.88	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340482

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2352 Z Terrace		Amount 316.88	
City Riviera Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340483

(a) SUBTOTAL of Itemized Independent Expenditures.....	633.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 203 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Robert Richardson		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 2352 Z Terrace		Amount 316.88	
City Riviera Beach	State FL	Zip Code 33404	Transaction ID : D340485
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 414 Lincoln Rd.		Amount 316.88	
City Cocoa	State FL	Zip Code 32926	Transaction ID : D340486
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	633.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 204 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Yettie Thompkins		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 414 Lincoln Rd.		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code Cocoa FL 32926	Transaction ID : D340487	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee John Tracey		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2812 Genessee Ave		Amount <div style="border: 1px solid black; padding: 2px;"> 316.88 </div>
City State Zip Code West Palm Beach FL 33409	Transaction ID : D340488	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 633.76 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 205 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee John Tracey		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2812 Genessee Ave		Amount 316.88	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340489

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 3414 34th Way		Amount 316.88	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340491

(a) SUBTOTAL of Itemized Independent Expenditures.....	633.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 206 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Frankisha Walker		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 3414 34th Way		Amount 316.88	
City West Palm Beach	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		294056.50	

Transaction ID : D340492

Full Name (Last, First, Middle Initial) of Payee Muslim Ali		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6513 Yellow Hammer Ave		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		2759696.52	

Transaction ID : D340493

(a) SUBTOTAL of Itemized Independent Expenditures.....	735.16
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 207 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Muslim Ali		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 6513 Yellow Hammer Ave		Amount 418.28	
City Tampa	State FL	Zip Code 33025	Transaction ID : D340494
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Khaim Jack Cousineau		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 2326 E 111 Avenue		Amount 418.28	
City Tampa	State FL	Zip Code 33612	Transaction ID : D340495
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 208 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Khaim Jack Cousineau		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 2326 E 111 Avenue		Amount 418.28	
City Tampa	State FL	Zip Code 33612	Transaction ID : D340496
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Alissah Depiro		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3721 Mission Court		Amount 418.28	
City Largo	State FL	Zip Code 33771	Transaction ID : D340497
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 209 OF 221
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC		FEC IDENTIFICATION NUMBER ▼ C C00521013	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Alissah Depiro		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 3721 Mission Court		Amount 418.28	
City Largo	State FL	Zip Code 33771	Transaction ID : D340498
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Savanah Goodland		Date MM / DD / YYYY 10 / 16 / 2012	
Mailing Address 14501 Audubon Trail #706		Amount 418.28	
City Tampa	State FL	Zip Code 33613	Transaction ID : D340499
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 210 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Savanah Goodland		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 14501 Audubon Trail #706		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340500

Full Name (Last, First, Middle Initial) of Payee Sarah Hagemen		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 6341 Halifax Drive		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City New Port Richey	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340501

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

Signature

M M M / D D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 211 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Sarah Hagemen		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 6341 Halifax Drive		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code New Port Richey FL 34653	Transaction ID : D340502	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Charles Jefferson		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 8515 River Drive		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code Tampa FL 33615	Transaction ID : D340503	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 212 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Charles Jefferson		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 8515 River Drive		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		294056.50	

Transaction ID : D340504

Full Name (Last, First, Middle Initial) of Payee Jonathan Juges		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2326 E 111 Avenue		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		2759696.52	

Transaction ID : D340505

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 213 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jonathan Juges		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2326 E 111 Avenue		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340507

Full Name (Last, First, Middle Initial) of Payee Jonathan Obas		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6372 Raleigh Street Apt 1904		Amount 418.28	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Transaction ID : D340508

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

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Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 214 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Jonathan Obas		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6372 Raleigh Street Apt 1904		Amount 418.28	
City Orlando	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hiondy Polanco		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 2326 E 111 Avenue		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 215 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Hiondy Polanco		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 2326 E 111 Avenue		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Calendar Year-To-Date Per Election for Office Sought 294056.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340511

Full Name (Last, First, Middle Initial) of Payee Jonathan Romero		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 1101 Arboleda Court		Amount <div style="border: 1px solid black; padding: 2px;"> 418.28 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D340512

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 216 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Jonathan Romero		Date MM / DD / YYYY 10 / 16 / 2012
Mailing Address 1101 Arboleda Court		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">418.28</div>
City Tampa	State FL	
Zip Code 33664		Transaction ID : D340513
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">294056.50</div>		

Full Name (Last, First, Middle Initial) of Payee Mable Smith		Date MM / DD / YYYY 10 / 16 / 2012
Mailing Address 4203 Arch		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">418.28</div>
City Tampa	State FL	
Zip Code 33607		Transaction ID : D340514
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2759696.52</div>		

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

 MM / DD / YYYY
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 217 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Mable Smith		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 4203 Arch		Amount 418.28	
City Tampa	State FL	Zip Code 33607	Transaction ID : D340515
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 294056.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Karla Taylor		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1009 S Bayshore Blvd #202		Amount 418.28	
City Safety Harbor	State FL	Zip Code 34695	Transaction ID : D340516
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2759696.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 218 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Karla Taylor		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 1009 S Bayshore Blvd #202		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code Safety Harbor FL 34695	Transaction ID : D340517	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 001 </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Sadye Vassil		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y </div>
Mailing Address 355 8 Avenue #9H		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City State Zip Code New York NY 10001	Transaction ID : D340518	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6	Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 001 </div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> 836.56 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px;"> </div>

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Gihan Perera

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 219 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Sadye Vassil		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 355 8 Avenue #9H		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City New York	State NY	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340519

Full Name (Last, First, Middle Initial) of Payee Brandon Williams		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 6720 S Lois Avenue Apt 8102		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 2759696.52 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340521

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">836.56</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 220 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Brandon Williams		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6720 S Lois Avenue Apt 8102		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 294056.50			

Transaction ID : D340522

Full Name (Last, First, Middle Initial) of Payee Nathan Williams		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 6720 S Lois Avenue		Amount 418.28	
City Tampa	State FL		
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2759696.52			

Transaction ID : D340523

(a) SUBTOTAL of Itemized Independent Expenditures.....	836.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 221 OF 221
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Florida Freedom PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521013 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name (Last, First, Middle Initial) of Payee Nathan Williams		Date <div style="display: inline-block; border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 6720 S Lois Avenue		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 418.28 </div>
City Tampa	State FL	
Purpose of Expenditure Estimated payment for salary and benefits from 10/16-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)

Transaction ID : D340524

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		State: District:
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;"> 294056.50 </div>		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">418.28</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">1423944.56</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gihan Perera

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 06 / 2012

Signature